

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS
EASTERN DIVISION**

In re:

ALFRED H SLEDGE

Debtor(s)

Case No. 09-25756

CHAPTER 13 STANDING TRUSTEE'S FINAL REPORT AND ACCOUNT

Tom Vaughn, chapter 13 trustee, submits the following Final Report and Account of the administration of the estate pursuant to 11 U.S.C. § 1302(b)(1). The trustee declares as follows:

- 1) The case was filed on 07/16/2009.
- 2) The plan was confirmed on 10/07/2009.
- 3) The plan was modified by order after confirmation pursuant to 11 U.S.C. § 1329 on NA.
- 4) The trustee filed action to remedy default by the debtor in performance under the plan on NA.
- 5) The case was converted on 01/14/2014.
- 6) Number of months from filing to last payment: 54.
- 7) Number of months case was pending: 55.
- 8) Total value of assets abandoned by court order: NA.
- 9) Total value of assets exempted: \$555.00.
- 10) Amount of unsecured claims discharged without payment: \$0.00.
- 11) All checks distributed by the trustee relating to this case have not cleared the bank.

Receipts:

Total paid by or on behalf of the debtor	\$21,045.54
Less amount refunded to debtor	\$369.22

NET RECEIPTS: **\$20,676.32**

Expenses of Administration:

Attorney's Fees Paid Through the Plan	\$3,500.00
Court Costs	\$0.00
Trustee Expenses & Compensation	\$1,091.94
Other	\$224.00

TOTAL EXPENSES OF ADMINISTRATION: **\$4,815.94**

Attorney fees paid and disclosed by debtor: \$0.00

Scheduled Creditors:

Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
ADVOCATE TRINITY HOSPITAL	Unsecured	740.00	NA	NA	0.00	0.00
AT&T	Unsecured	103.00	NA	NA	0.00	0.00
CALIFORNIA STUDENT AID	Unsecured	4,868.00	NA	NA	0.00	0.00
CALIFORNIA STUDENT AID	Unsecured	3,139.00	NA	NA	0.00	0.00
CERTEGY CHECK SVC	Unsecured	80.00	NA	NA	0.00	0.00
CITY OF CHICAGO DEPT OF REVENUE	Unsecured	NA	73.20	73.20	0.00	0.00
CITY OF COUNTRY CLUB HILLS	Unsecured	250.00	NA	NA	0.00	0.00
CNAC JOLIET INC	Unsecured	3,342.00	0.00	548.00	0.00	0.00
CNAC JOLIET INC	Secured	7,500.00	11,390.00	10,842.00	10,842.00	699.01
COLLECTION	Unsecured	387.00	NA	NA	0.00	0.00
ECMC	Unsecured	NA	9,953.41	9,953.41	0.00	0.00
IL STATE DISBURSEMENT UNIT	Priority	4,114.00	1,009.00	1,009.00	573.46	0.00
IL STATE DISBURSEMENT UNIT	Priority	NA	6,591.17	6,591.17	3,745.91	0.00
ILLINOIS DEPT OF REVENUE	Priority	NA	610.96	610.96	0.00	0.00
ILLINOIS DEPT OF REVENUE	Secured	NA	3,401.83	3,401.83	0.00	0.00
ILLINOIS DEPT OF REVENUE	Unsecured	4,000.00	1,239.76	1,239.76	0.00	0.00
INTERNAL REVENUE SERVICE	Unsecured	6,000.00	10,342.82	10,342.82	0.00	0.00
INTERNAL REVENUE SERVICE	Priority	NA	647.10	647.10	0.00	0.00
KEY NOTE CONSULTING	Unsecured	280.00	NA	NA	0.00	0.00
MCI	Unsecured	1,030.00	NA	NA	0.00	0.00
MCSI/RMI	Unsecured	NA	1,250.00	1,250.00	0.00	0.00
MIDWEST PHYSICIAN GROUP	Unsecured	264.00	NA	NA	0.00	0.00
MIDWEST PHYSICIAN GROUP	Unsecured	84.00	NA	NA	0.00	0.00
NICOR GAS	Unsecured	2,855.00	2,974.05	2,974.05	0.00	0.00
PAYDAY LOAN STORE OF IL INC	Unsecured	500.00	NA	NA	0.00	0.00
PRA RECEIVABLES MANAGEMENT	Unsecured	NA	439.47	439.47	0.00	0.00
SPRINT	Unsecured	465.00	NA	NA	0.00	0.00
ST JAMES HOSPITAL	Unsecured	50.00	NA	NA	0.00	0.00
ST JAMES HOSPITAL & HEALTH CTR	Unsecured	3,011.00	NA	NA	0.00	0.00
ST JAMES HOSPITAL & HEALTH CTR	Unsecured	246.00	NA	NA	0.00	0.00
ST JAMES HOSPITAL & HEALTH CTR	Unsecured	73.00	NA	NA	0.00	0.00

<u>Scheduled Creditors:</u>						
Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
TCF BANK	Unsecured	540.00	NA	NA	0.00	0.00
WINDY CITY EMERGENCY	Unsecured	118.00	NA	NA	0.00	0.00

Summary of Disbursements to Creditors:			
	<u>Claim Allowed</u>	<u>Principal Paid</u>	<u>Interest Paid</u>
Secured Payments:			
Mortgage Ongoing	\$0.00	\$0.00	\$0.00
Mortgage Arrearage	\$0.00	\$0.00	\$0.00
Debt Secured by Vehicle	\$10,842.00	\$10,842.00	\$699.01
All Other Secured	\$3,401.83	\$0.00	\$0.00
TOTAL SECURED:	\$14,243.83	\$10,842.00	\$699.01
Priority Unsecured Payments:			
Domestic Support Arrearage	\$7,600.17	\$4,319.37	\$0.00
Domestic Support Ongoing	\$0.00	\$0.00	\$0.00
All Other Priority	\$1,258.06	\$0.00	\$0.00
TOTAL PRIORITY:	\$8,858.23	\$4,319.37	\$0.00
GENERAL UNSECURED PAYMENTS:	\$26,820.71	\$0.00	\$0.00

Disbursements:		
Expenses of Administration	<u>\$4,815.94</u>	
Disbursements to Creditors	<u>\$15,860.38</u>	
TOTAL DISBURSEMENTS :		<u>\$20,676.32</u>

12) The trustee certifies that the foregoing summary is true and complete and all administrative matters for which the trustee is responsible have been completed. The trustee requests that the trustee be discharged and granted such relief as may be just and proper.

Dated: 02/12/2014

By: /s/ Tom Vaughn

Trustee

STATEMENT: This Unified Form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.